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*NOT AN ATTORNEY

December 14, 2005

Electronic Filing

Ms. Marlene H. Dortch
Federal Communications Commission
445 12th Street, SW
Washington, DC 20554

Re: ET Docket No. 05-213
Notification of Ex Parte Presentations

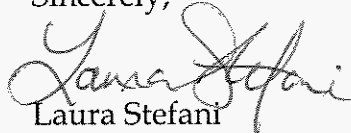
Dear Ms. Dortch:

On December 13 and 14, 2005, with regard to the above-referenced proceeding, the attached emails were sent to Fred Campbell, Legal Advisor to Chairman Martin, Barry Ohlson, Senior Legal Advisor to Commissioner Adelstein, and John Giusti, on detail to the Office of Commissioner Copps to advise on spectrum and international issues.

The emails express the urgent need by the medical community for the Commission to take prompt, favorable action and grant DexCom its requested waiver.

Please direct questions concerning this matter to the undersigned.

Sincerely,


Laura Stefani
Attorney for DexCom, Inc.

cc: Fred Campbell
Barry Ohlson
John Giusti

From: Garg, Satish K
Sent: Tuesday, December 13, 2005 1:27 PM
To: 'fred.campbell@fcc.gov'
Cc: 'Barry.Ohlson@fcc.gov'; 'John.Giusti@fcc.gov'
Subject: Urgent Need for Continuous Glucose Monitoring

Chairman Martin – FCC,
Commissioner Adelstein - FCC,
Commissioner Copps - FCC

Attention:
Fred Campbell,
Barry Ohlson,
John Giusti,

Dear Fred, Barry & John,

I have been practicing medicine for the past 30 years and specifically practicing endocrinology and diabetes since 1982. In addition to caring for patients with Diabetes, I have published extensively in the field of diabetes and given many endocrine and medicine ground rounds and lectured globally in many areas of diabetes. I am enclosing a copy of my CV.

There is an urgent need for improving glucose control as measured by glycosylated hemoglobin A1c (A1c values) and glucose excursions, which have clearly shown to impact long-term complications of diabetes as documented DCCT in 1993 and 2005 and UKPDS in 2000. One of the biggest hurdles in achieving tight glucose control is lack of availability of continuous glucose data which is available to a non-diabetic individual where beta cells of the pancreas continuously monitor the plasma glucose and then release the necessary amount of insulin needed to keep healthy non-diabetic subjects in euglycemic range. Subjects with diabetes are required to monitor their glucose as least 4 to 5 times a day which **only** gives 4-5 seconds worth of glucose information in a day. Thus, the availability of continuous glucose monitoring (semi-invasive or non-invasive) would be a huge advancement in the treatment of diabetes where subjects will be informed of their glucose values every 5 minutes on a continuous basis and in addition, are allowed to see the glucose trends over the previous 1, 3, or 9 hours, or, can also see the glucose values for the full 24-hours.

I have been working on many glucose sensors for over 8 years and specifically DexCom Inc technology for the past 4 years and have published three peer-reviewed manuscripts in the area; please see my CV (1. Garg, SK, Zisser, H., Schwartz, S., Bailey, T., Kaplan, R., Ellis, S., Jovanovic, L: Improvement in Glycemic Control with a Transcutaneous, Real-Time Continuous Glucose Sensor: Randomized Controlled Trial: Accepted for Publication to Diabetes Care, Jan., 2006; 2. Garg SK, Schwartz S, Edelman SV: Improved glucose excursions using an implantable real-time continuous implanted glucose sensor in adults with type 1 diabetes. Diabetes Care, 27:734-738, 2004. 3. Garg SK: Health Impact from Frequent and Continuous Glucose Monitoring, an Editorial, Diabetes technology and Therapeutics 6: 523-524, 2004).

The use of this technology will not only further advance the diabetes care but will also help in reducing ER admissions due to hypoglycemic coma (severe hypoglycemic episodes) as it has the capability of hypoglycemic and hyperglycemic alarms/alerts. This technology will also allow patients to predict their glucose values in the next few hours based on the glucose trends as available through continuous glucose data and rate of change of glucose.

Thus, I feel that approval of DexCom's STS (short-term continuous glucose monitor) is urgently needed to improve lives of those affected by diabetes.

Please feel free to contact me if you need any further information in this matter.

Thank you and Happy Holidays!

Satish K. Garg, MD

Professor of Medicine and Pediatrics

Director, Adult Program

Clinical and Research Endowed Chairs

Barbara Davis Center for Childhood Diabetes

University of Colorado Health Sciences Center **US Mail Address:**

1775 North Ursula, Room M20-1323

Aurora, CO 80010

phone: 303-724-6713/303-724-6770

fax: 303-724-6784 or 6797

satish.garg@uchsc.edu <<mailto:satish.garg@uchsc.edu>>

Mail stop A140

P.O. Box 6511

Aurora, CO 80045

From: Timothy Bailey [mailto:tbailey@ncendocrine.com]
Sent: Wednesday, December 14, 2005 3:03 AM
To: Barry.Ohlson@fcc.gov
Cc: Henry Goldberg
Subject: DEXCOM continuous glucose meter

Dear Mr. Ohlson,

During the clinical trials of the DexCom short-term glucose sensor I have had first-hand opportunity to witness its benefits to patients with diabetes.

This is a device that people with diabetes find very useful. There is objective evidence that wearers of this device have fewer low and high glucose levels and more blood sugar values in the desirable range during a day.

Please support granting a waiver that will help this technology become quickly available to my patients.

Sincerely,

Timothy S. Bailey, MD, FACE, FACP

President, North County Endocrine Medical Group
Clinical Assistant Professor of Medicine, UCSD School of Medicine

700 West El Norte Parkway Suite 201
Escondido, CA 92026
Phone: 760.743.1431 x205
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e-mail: tbailey@ncendocrine.com
www.ncendocrine.com

From: Timothy Bailey [mailto:tbailey@ncendocrine.com]
Sent: Wednesday, December 14, 2005 3:03 AM
To: John.Giusti@fcc.gov
Cc: Henry Goldberg
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